General Assembly

Distr.: General
5 August 2014

Sixty-eighth session
Agenda item 164

Resolution adopted by the General Assembly on 30 June 2014

[*on the report of the Fifth Committee (A/68/931)*]

68/297. Financing of the African Union-United Nations Hybrid Operation in Darfur

The General Assembly,

Having considered the reports of the Secretary-General on the financing of the African Union-United Nations Hybrid Operation in Darfur[1] and the related report of the Advisory Committee on Administrative and Budgetary Questions,[2]

Recalling Security Council resolution 1769 (2007) of 31 July 2007, by which the Council established the African Union-United Nations Hybrid Operation in Darfur for an initial period of 12 months from 31 July 2007, and the subsequent resolutions by which the Council extended the mandate of the Operation, the latest of which was resolution 2113 (2013) of 30 July 2013, by which the Council extended the mandate of the Operation until 31 August 2014,

Recalling also its resolution 62/232 A of 22 December 2007 on the financing of the Operation and its subsequent resolutions thereon, the latest of which was resolution 67/284 of 28 June 2013,

Reaffirming the general principles underlying the financing of United Nations peacekeeping operations, as stated in its resolutions 1874 (S-IV) of 27 June 1963, 3101 (XXVIII) of 11 December 1973 and 55/235 of 23 December 2000,

Mindful of the fact that it is essential to provide the Operation with the financial resources necessary to enable it to fulfil its responsibilities under the relevant resolutions of the Security Council,

Noting the hybrid nature of the Operation, and in that regard stressing the importance of ensuring full coordination of efforts between the African Union and the United Nations at the strategic level, unity of command at the operational level and clear delegation of authority and accountability lines,

1. *Requests* the Secretary-General to entrust the Head of Mission with the task of formulating future budget proposals in full accordance with the provisions of its resolutions 59/296 of 22 June 2005, 60/266 of 30 June 2006, 61/276 of 29 June

[1] A/68/619 and A/68/754.

[2] A/68/782/Add.15.

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2007, 64/269 of 24 June 2010, 65/289 of 30 June 2011 and 66/264 of 21 June 2012, as well as other relevant resolutions;

2. *Takes note* of the status of contributions to the African Union-United Nations Hybrid Operation in Darfur as at 30 April 2014, including the contributions outstanding in the amount of 95.9 million United States dollars, representing some 1 per cent of the total assessed contributions, notes with concern that only 85 Member States have paid their assessed contributions in full, and urges all other Member States, in particular those in arrears, to ensure payment of their outstanding assessed contributions;

3. *Expresses its appreciation* to those Member States which have paid their assessed contributions in full, and urges all other Member States to make every possible effort to ensure payment of their assessed contributions to the Operation in full;

4. *Expresses concern* at the financial situation with regard to peacekeeping activities, in particular as regards the reimbursements to troop contributors that bear additional burdens owing to overdue payments by Member States of their assessments;

5. *Emphasizes* that all future and existing peacekeeping missions shall be given equal and non-discriminatory treatment in respect of financial and administrative arrangements;

6. *Also emphasizes* that all peacekeeping missions shall be provided with adequate resources for the effective and efficient discharge of their respective mandates;

7. *Requests* the Secretary-General to ensure that proposed peacekeeping budgets are based on the relevant legislative mandates;

8. *Endorses* the conclusions and recommendations contained in the report of the Advisory Committee on Administrative and Budgetary Questions,[2] subject to the provisions of the present resolution, and requests the Secretary-General to ensure their full implementation;

9. *Recognizes* the significant role played by quick-impact projects in achieving the overall objectives of the mission mandate, and in this regard requests the Secretary-General to ensure the implementation of planned projects as a matter of priority;

10. *Requests* the Secretary-General to ensure the full implementation of the relevant provisions of its resolutions 59/296, 60/266, 61/276, 64/269, 65/289 and 66/264;

11. *Also requests* the Secretary-General to take all action necessary to ensure that the Operation is administered with a maximum of efficiency and economy;

Budget performance report for the period from 1 July 2012 to 30 June 2013

12. *Takes note* of the report of the Secretary-General on the budget performance of the Operation for the period from 1 July 2012 to 30 June 2013;[3]

[3] A/68/619.

Estimates for the period from 1 July to 31 December 2014

13. *Authorizes* the Secretary-General to enter into commitments for the Operation in a total amount not exceeding 639,654,200 dollars for the period from 1 July to 31 December 2014;

Financing of the commitment authority

14. *Decides* to apportion among Member States the amount of 213,218,068 dollars for the period from 1 July to 31 August 2014, in accordance with the levels updated in its resolution 67/239 of 24 December 2012, taking into account the scale of assessments for 2014, as set out in its resolution 67/238 of 24 December 2012;

15. *Also decides* that, in accordance with the provisions of its resolution 973 (X) of 15 December 1955, there shall be set off against the apportionment among Member States, as provided for in paragraph 14 above, their respective share in the Tax Equalization Fund of 3,898,783 dollars, representing the estimated staff assessment income approved for the period from 1 July to 31 August 2014;

16. *Further decides* to apportion among Member States the amount of 426,436,132 dollars for the period from 1 September to 31 December 2014, at a monthly rate of 106,609,033 dollars, in accordance with the levels updated in its resolution 67/239, taking into account the scale of assessments for 2014, as set out in its resolution 67/238, subject to a decision of the Security Council to extend the mandate of the Operation;

17. *Decides* that, in accordance with the provisions of its resolution 973 (X), there shall be set off against the apportionment among Member States, as provided for in paragraph 16 above, their respective share in the Tax Equalization Fund of 7,797,567 dollars, representing the estimated staff assessment income approved for the period from 1 September to 31 December 2014;

18. *Also decides* that, for Member States that have fulfilled their financial obligations to the Operation, there shall be set off against their apportionment, as provided for in paragraph 14 above, their respective share of the unencumbered balance and other income in the amount of 59,715,100 dollars in respect of the financial period ended 30 June 2013, in accordance with the levels updated in its resolution 67/239, taking into account the scale of assessments for 2013, as set out in its resolution 67/238;

19. *Further decides* that, for Member States that have not fulfilled their financial obligations to the Operation, there shall be set off against their outstanding obligations their respective share of the unencumbered balance and other income in the amount of 59,715,100 dollars in respect of the financial period ended 30 June 2013, in accordance with the scheme set out in paragraph 18 above;

20. *Decides* that the decrease of 2,158,100 dollars in the estimated staff assessment income in respect of the financial period ended 30 June 2013 shall be set off against the credits in the amount of 59,715,100 dollars referred to in paragraphs 18 and 19 above;

21. *Emphasizes* that no peacekeeping mission shall be financed by borrowing funds from other active peacekeeping missions;

22. *Encourages* the Secretary-General to continue to take additional measures to ensure the safety and security of all personnel participating in the Operation under the auspices of the United Nations, bearing in mind paragraphs 5 and 6 of Security Council resolution 1502 (2003) of 26 August 2003;

23. *Invites* voluntary contributions to the Operation in cash and in the form of services and supplies acceptable to the Secretary-General, to be administered, as appropriate, in accordance with the procedure and practices established by the General Assembly;

24. *Decides* to include in the provisional agenda of its sixty-ninth session the item entitled "Financing of the African Union-United Nations Hybrid Operation in Darfur".

99th plenary meeting
30 June 2014

General Assembly

Distr.: General
5 August 2014

Sixty-eighth session
Agenda item 165

Resolution adopted by the General Assembly on 30 June 2014

[*on the report of the Fifth Committee (A/68/933)*]

68/298. Financing of the activities arising from Security Council resolution 1863 (2009)

The General Assembly,

Having considered the reports of the Secretary-General on the financing of the United Nations Support Office for the African Union Mission in Somalia[1] and the related report of the Advisory Committee on Administrative and Budgetary Questions,[2]

Recalling Security Council resolution 1863 (2009) of 16 January 2009, in which the Council expressed its intent to establish a United Nations peacekeeping operation in Somalia as a follow-on force to the African Union Mission in Somalia, subject to a further decision of the Council by 1 June 2009, and requested the Secretary-General, in order for the forces of the Mission to be incorporated into a United Nations peacekeeping operation, to provide a United Nations logistical support package to the Mission, including equipment and services,

Recalling also the subsequent resolutions of the Council by which the logistical support package for the Mission was extended, the latest of which was resolution 2124 (2013) of 12 November 2013, by which the Council extended the logistical support package until 31 October 2014,

Recalling further its resolution 63/275 A of 7 April 2009 on the financing of the activities arising from Security Council resolution 1863 (2009) and its subsequent resolutions thereon, the latest of which was resolution 67/285 of 28 June 2013,

Reaffirming the general principles underlying the financing of United Nations peacekeeping operations, as stated in its resolutions 1874 (S-IV) of 27 June 1963, 3101 (XXVIII) of 11 December 1973 and 55/235 of 23 December 2000,

Noting with appreciation that voluntary contributions have been made to the United Nations Trust Fund established to support the African Union Mission in Somalia,

1. *Takes note* of the status of contributions to the United Nations Support Office for the African Union Mission in Somalia as at 30 April 2014, including the contributions outstanding in the amount of 115.0 million United States dollars,

[1] A/68/605 and A/68/745.

[2] A/68/782/Add.9.

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representing some 7 per cent of the total assessed contributions, notes with concern that only 74 Member States have paid their assessed contributions in full, and urges all other Member States, in particular those in arrears, to ensure payment of their outstanding assessed contributions;

2. *Endorses* the conclusions and recommendations contained in the report of the Advisory Committee on Administrative and Budgetary Questions,[2] subject to the provisions of the present resolution, and requests the Secretary-General to ensure their full implementation;

Budget performance report for the period from 1 July 2012 to 30 June 2013

3. *Takes note* of the report of the Secretary-General on the budget performance of the Support Office for the period from 1 July 2012 to 30 June 2013;[3]

Budget estimates for the period from 1 July 2014 to 30 June 2015

4. *Decides* to appropriate to the Special Account for the United Nations Support Office for the African Union Mission in Somalia the amount of 528,207,800 dollars for the period from 1 July 2014 to 30 June 2015, inclusive of 489,968,100 dollars for the maintenance of the Support Office, 31,704,400 dollars for the support account for peacekeeping operations and 6,535,300 dollars for the United Nations Logistics Base at Brindisi, Italy;

Financing of the appropriation

5. *Decides* to apportion among Member States the amount of 176,069,267 dollars for the period from 1 July to 31 October 2014, in accordance with the levels updated in its resolution 67/239 of 24 December 2012, taking into account the scale of assessments for 2014, as set out in its resolution 67/238 of 24 December 2012;

6. *Also decides* that, in accordance with the provisions of its resolution 973 (X) of 15 December 1955, there shall be set off against the apportionment among Member States, as provided for in paragraph 5 above, their respective share in the Tax Equalization Fund of 2,360,767 dollars, comprising the estimated staff assessment income of 1,495,367 dollars approved for the Support Office, the prorated share of 670,767 dollars of the estimated staff assessment income approved for the support account and the prorated share of 194,633 dollars of the estimated staff assessment income approved for the United Nations Logistics Base;

7. *Further decides* to apportion among Member States the amount of 352,138,533 dollars for the period from 1 November 2014 to 30 June 2015 at a monthly rate of 44,017,317 dollars, in accordance with the levels updated in its resolution 67/239, taking into account the scale of assessments for 2014 and 2015, as set out in its resolution 67/238, subject to a decision of the Security Council to extend the mandate of the Support Office;

8. *Decides* that, in accordance with the provisions of its resolution 973 (X), there shall be set off against the apportionment among Member States, as provided for in paragraph 7 above, their respective share in the Tax Equalization Fund of 4,721,533 dollars, comprising the estimated staff assessment income of 2,990,733 dollars approved for the Support Office, the prorated share of 1,341,533 dollars of the estimated staff assessment income approved for the support account and the prorated share of 389,267 dollars of the estimated staff assessment income approved for the United Nations Logistics Base;

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[3] A/68/605.

9. *Also decides* that, for Member States that have fulfilled their financial obligations to the Support Office, there shall be set off against their apportionment, as provided for in paragraph 5 above, their respective share of the unencumbered balance and other income in the amount of 28,473,800 dollars in respect of the financial period ended 30 June 2013, in accordance with the levels updated in its resolution 67/239, taking into account the scale of assessments for 2013, as set out in its resolution 67/238;

10. *Further decides* that, for Member States that have not fulfilled their financial obligations to the Support Office, there shall be set off against their outstanding obligations their respective share of the unencumbered balance and other income in the amount of 28,473,800 dollars in respect of the financial period ended 30 June 2013, in accordance with the scheme set out in paragraph 9 above;

11. *Decides* that the increase of 420,700 dollars in the estimated staff assessment income in respect of the financial period ended 30 June 2013 shall be added to the credits in the amount of 28,473,800 dollars referred to in paragraphs 9 and 10 above;

12. *Invites* voluntary contributions to the United Nations Trust Fund established to support the African Union Mission in Somalia;

13. *Decides* to include in the provisional agenda of its sixty-ninth session the item entitled "Financing of the activities arising from Security Council resolution 1863 (2009)".

99th plenary meeting
30 June 2014

General Assembly

Distr.: General
11 August 2014

Sixty-eighth session
Agenda item 176

Resolution adopted by the General Assembly on 30 June 2014

[*on the report of the Fifth Committee (A/68/932)*]

68/299. Financing of the United Nations Multidimensional Integrated Stabilization Mission in the Central African Republic

The General Assembly,

Having considered the note by the Secretary-General on the financing arrangements for the United Nations Multidimensional Integrated Stabilization Mission in the Central African Republic[1] and the related report of the Advisory Committee on Administrative and Budgetary Questions,[2]

Recalling Security Council resolution 2149 (2014) of 10 April 2014, by which the Council established the United Nations Multidimensional Integrated Stabilization Mission in the Central African Republic as from 10 April 2014 for an initial period until 30 April 2015, requested the Secretary-General to subsume the United Nations Integrated Peacebuilding Office in the Central African Republic into the Mission as from the same date, decided that, as from 15 September 2014, the Mission will initially comprise up to 10,000 military personnel, including 240 military observers and 200 staff officers, and 1,800 police personnel, comprising 1,400 formed police unit personnel and 400 individual police officers, and 20 corrections officers, and also decided that the transfer of authority from the African-led International Support Mission in the Central African Republic to the Mission will take place on 15 September 2014,

1. *Endorses* the conclusions and recommendations contained in the report of the Advisory Committee on Administrative and Budgetary Questions,[2] and requests the Secretary-General to ensure their full implementation;

2. *Recalls* paragraph 16 of the report of the Advisory Committee, and decides to consider the administrative arrangements associated with inter-mission cooperation during the second part of the resumed sixty-ninth session, while maintaining existing arrangements;

[1] A/68/874.
[2] A/68/782/Add.18.

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Estimates for the period from 10 April to 31 December 2014

3. *Authorizes* the Secretary-General to establish a special account for the United Nations Multidimensional Integrated Stabilization Mission in the Central African Republic for the purpose of accounting for the income received and the expenditure incurred in respect of the Mission;

4. *Also authorizes* the Secretary-General to enter into commitments for the Mission in an amount not exceeding 312,976,400 United States dollars for the period from 10 April to 31 December 2014, inclusive of the amount of 59,552,000 dollars previously authorized by the Advisory Committee for the period from 10 April to 30 June 2014 under the terms of section VI of its resolution 64/269 of 24 June 2010;

Financing of the commitment authority

5. *Decides* to apportion among Member States the amount of 59,552,000 dollars for the period from 10 April to 30 June 2014, in accordance with the levels updated in its resolution 67/239 of 24 December 2012, taking into account the scale of assessments for 2014, as set out in its resolution 67/238 of 24 December 2012;

6. *Also decides* that, in accordance with the provisions of its resolution 973 (X) of 15 December 1955, there shall be set off against the apportionment among Member States, as provided for in paragraph 5 above, their respective share in the Tax Equalization Fund of 621,900 dollars, for the period from 10 April to 30 June 2014 representing the estimated staff assessment income approved for the Mission;

7. *Further decides* to apportion among Member States the amount of 253,424,400 dollars for the period from 1 July to 31 December 2014, in accordance with the levels updated in its resolution 67/239, taking into account the scale of assessments for 2014, as set out in its resolution 67/238;

8. *Decides* that, in accordance with the provisions of its resolution 973 (X), there shall be set off against the apportionment among Member States, as provided for in paragraph 7 above, their respective share in the Tax Equalization Fund of 3,649,800 dollars, for the period from 1 July to 31 December 2014, representing the estimated staff assessment income approved for the Mission;

9. *Invites* voluntary contributions to the Mission in cash and in the form of services and supplies acceptable to the Secretary-General, to be administered, as appropriate, in accordance with the procedure and practices established by the General Assembly;

10. *Decides* to include in the provisional agenda of its sixty-ninth session the item entitled "Financing of the United Nations Multidimensional Integrated Stabilization Mission in the Central African Republic".

99th plenary meeting
30 June 2014

General Assembly

Distr.: General
17 July 2014

Sixty-eighth session
Agenda item 118

Resolution adopted by the General Assembly on 10 July 2014

[*without reference to a Main Committee (A/68/L.53)*]

68/300. Outcome document of the high-level meeting of the General Assembly on the comprehensive review and assessment of the progress achieved in the prevention and control of non-communicable diseases

The General Assembly

Adopts the following outcome document:

Outcome document of the high-level meeting of the General Assembly on the comprehensive review and assessment of the progress achieved in the prevention and control of non-communicable diseases

We, Ministers and representatives of States and Governments and heads of delegations, assembled at the United Nations on 10 and 11 July 2014 to take stock of the progress made in implementing the commitments set out in the political declaration of the high-level meeting of the General Assembly on the prevention and control of non-communicable diseases, adopted by the General Assembly in its resolution 66/2 of 19 September 2011,

Intensifying our efforts towards a world free of the avoidable burden of non-communicable diseases

1. Reaffirm the political declaration, which has catalysed action and retains great potential for engendering sustainable improved health and human development outcomes;

2. Reaffirm our commitment to address the global burden and threat of non-communicable diseases, which constitute one of the major challenges for development in the twenty-first century, undermine social and economic development throughout the world, threaten the achievement of internationally agreed development goals and may lead to increasing inequalities within and between countries and populations;

3. Reiterate that the most prevalent non-communicable diseases, namely, cardiovascular diseases, cancers, chronic respiratory diseases and diabetes, are primarily linked to four common risk factors, namely, tobacco use, harmful use of alcohol, unhealthy diet and physical inactivity;

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4. Reiterate our concern regarding the rising levels of obesity in different regions, particularly among children and youth;

5. Recognize that mental and neurological conditions are an important cause of morbidity and contribute to the global non-communicable disease burden, in respect of which there is a need to provide equitable access to effective programmes and health-care interventions, as described in the comprehensive mental health action plan 2013–2020 of the World Health Organization;[1]

6. Recall the Moscow Declaration, adopted at the first Global Ministerial Conference on Healthy Lifestyles and Non-communicable Disease Control, held in April 2011,[2] as well as all the regional initiatives undertaken on the prevention and control of non-communicable diseases, including the declaration of the Heads of State and Government of the Caribbean Community entitled "Uniting to stop the epidemic of chronic non-communicable diseases", adopted in September 2007, the Libreville Declaration on Health and Environment in Africa, adopted in August 2008, the statement of the Commonwealth Heads of Government on action to combat non-communicable diseases, adopted in November 2009, the declaration of commitment of the Fifth Summit of the Americas, adopted in June 2009, the Parma Declaration on Environment and Health, adopted by the member States in the European region of the World Health Organization in March 2010, the Dubai Declaration on Diabetes and Chronic Non-communicable Diseases in the Middle East and Northern Africa Region, adopted in December 2010, the European Charter on Counteracting Obesity, adopted in November 2006, the Aruba Call for Action on Obesity of June 2011, and the Honiara Communiqué on addressing non-communicable disease challenges in the Pacific region, adopted in July 2011;

Taking stock: progress achieved since 2011

7. Welcome the development by the World Health Organization, in accordance with paragraph 61 of the political declaration, of the comprehensive global monitoring framework, including the set of 9 voluntary global targets for achievement by 2025 and a set of 25 indicators to be applied across regional and country settings in order to monitor trends and assess progress made in the implementation of national strategies and plans on non-communicable diseases, and the adoption of the framework by the World Health Assembly;

8. Also welcome the endorsement by the World Health Assembly of the Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013–2020[1] and its adoption of the nine indicators to inform reporting on progress made in implementing the Global Action Plan;

9. Welcome the establishment of the United Nations Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases and the endorsement of its terms of reference by the Economic and Social Council on 13 June 2014;

10. Welcome the request that the Director General of the World Health Organization prepare, for consideration during the sixty-eighth World Health Assembly, in consultation with Member States, United Nations organizations and other relevant stakeholders, as appropriate, and within existing resources, a framework for country action, for adaptation to different contexts, taking into

[1] World Health Organization, document WHA66/2013/REC/1.

[2] A/65/859, annex.

account the Helsinki Statement on Health in All Policies, adopted at the Eighth Global Conference on Health Promotion, aimed at supporting national efforts to improve health, ensure health protection, health equity and health system functioning, including through action across sectors on determinants of health and risk factors of non-communicable diseases, based on best available knowledge and evidence;

11. Also welcome the endorsement by the World Health Assembly of the terms of reference for the comprehensive global coordination mechanism for the prevention and control of non-communicable diseases;

12. Recognize the remarkable progress achieved at the national level, since September 2011, including an increase in the number of countries which have an operational national non-communicable disease policy with a budget for implementation, from 32 per cent of countries in 2010 to 50 per cent of countries in 2013;

13. Recognize that progress in the prevention and control of non-communicable diseases has been insufficient and highly uneven, due in part to their complexity and challenging nature, and that continued and increased efforts are essential for achieving a world free of the avoidable burden of non-communicable diseases;

14. Acknowledge that, despite some improvements, commitments to promote, establish or support and strengthen, by 2013, multisectoral national policies and plans for the prevention and control of non-communicable diseases, and to increase and prioritize budgetary allocations for addressing non-communicable diseases, were often not translated into action, owing to a number of factors, including the lack of national capacity;

15. Acknowledge that many countries, in particular developing countries, are struggling to move from commitment to action and, in this regard, reiterate our call upon Member States to consider implementing, as appropriate, within national contexts, policies and evidence-based, affordable, cost-effective, population-wide and multisectoral interventions, including a reduction of modifiable risk factors of non-communicable diseases as described in appendix 3 to the Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013–2020;

16. Recognize that affordable interventions to reduce environmental and occupational health risks are available and that prioritization and implementation of such interventions in accordance with national conditions can contribute to reducing the burden of non-communicable diseases;

17. Reiterate our call upon Member States to consider implementing, as appropriate, according to national circumstances, policy options and cost-effective, affordable, multisectoral interventions for the prevention and control of non-communicable diseases[3] in order to achieve the nine voluntary global targets for non-communicable diseases by 2025;

Reaffirming our leadership: commitments and actions

18. Reaffirm our commitment to advance the implementation of multisectoral, cost-effective, population-wide interventions in order to reduce the impact of the four common behavioural risk factors for non-communicable diseases, through the

[3] Such as those included in appendix 3 to the annex to resolution WHA66.10.

implementation of relevant international agreements, strategies, national policies, legislation and development priorities, including educational, regulatory and fiscal measures, without prejudice to the right of sovereign nations to determine and establish their taxation policies and other policies, where appropriate, by involving all relevant sectors, civil society and communities, as appropriate;

19. Recognize that the implementation of the Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013–2020, the Global Strategy on Diet, Physical Activity and Health,[4] the Global Strategy to Reduce the Harmful Use of Alcohol,[5] the Global Strategy for Infant and Young Child Feeding of the World Health Organization and the United Nations Children's Fund, and the World Health Organization Set of Recommendations on the Marketing of Foods and Non-alcoholic Beverages to Children,[6] as appropriate, will accelerate efforts to reduce non-communicable diseases, and reiterate our call upon Member States to mobilize political will and financial resources for that purpose;

20. Reiterate our commitment to accelerate the implementation of the World Health Organization Framework Convention on Tobacco Control[7] by States parties, and encourage countries to consider becoming parties to the Convention;

21. Call upon Member States to take steps, including, where appropriate, effective legislation, cross-sectoral structures, processes, methods and resources that enable societal policies which take into account and address the impacts on health determinants, health protection, health equity and health system functioning, and which measure and track economic, social and environmental determinants and disparities in health;

22. Call upon Member States to develop, as appropriate, institutional capacity with adequate knowledge and skills for assessing the impact on health of policy initiatives in all sectors, identifying solutions and negotiating policies across sectors to achieve improved outcomes from the perspective of health, health equity and health system functioning;

23. Recognize the importance of universal health coverage in national health systems, and call upon Member States to strengthen health systems, including health-care infrastructure, human resources for health, and health and social protection systems, particularly in developing countries, in order to respond effectively and equitably to the health-care needs of people with non-communicable diseases throughout the life cycle;

24. Continue to scale up, where appropriate, a package of proven, cost-effective interventions, including those identified in appendix 3 to the Global Action Plan;

25. Reiterate the importance of increased access to cost-effective cancer screening programmes as determined by national situations, as well as the importance of promoting increased access to cost-effective vaccinations to prevent infections associated with cancer, as part of national immunization schedules;

26. Acknowledge that limited progress has been made in implementing paragraph 44 of the annex to General Assembly resolution 66/2, and although an

[4] World Health Organization, document WHA57/2004/REC/1, resolution 57.17, annex.

[5] World Health Organization, document WHA63/2010/REC/1, annex 3.

[6] World Health Organization, document WHA63/2010/REC/1, annex 4.

[7] United Nations, *Treaty Series*, vol. 2302, No. 41032.

increased number of private sector entities have started to produce and promote food products consistent with a healthy diet, such products are not always broadly affordable, accessible and available in all communities within countries;

27. Continue to encourage policies that support the production and manufacture of and facilitate access to foods that contribute to a healthy diet and provide greater opportunities for the utilization of healthy local agricultural products and foods, thereby contributing to efforts to cope with the challenges and take advantage of opportunities presented by globalization and to achieve food security and adequate nutrition;

28. Reaffirm the primary role and responsibility of Governments in responding to the challenge of non-communicable diseases, including through engaging non-governmental organizations, the private sector and other sectors of society to generate effective responses for the prevention and control of non-communicable diseases at the global, national and local levels;

29. Recall that effective non-communicable disease prevention and control requires leadership and multisectoral approaches to health at the governmental level, including, as appropriate, health-in-all-policies and whole-of-government approaches across sectors beyond health, while protecting public health policies for the prevention and control of non-communicable diseases from undue influence by any form of real, perceived or potential conflict of interest;

Moving forward: national commitments

30. Commit to addressing non-communicable diseases as a matter of priority in national development plans, as appropriate within national contexts and the international development agenda, and to take the following measures with the engagement of all relevant sectors, including civil society and communities, as appropriate:

(*a*) Enhance governance:

(i) By 2015, consider setting national targets for 2025 and process indicators based on national situations, taking into account the nine voluntary global targets for non-communicable diseases, building on guidance provided by the World Health Organization, to focus on efforts to address the impacts of non-communicable diseases and to assess the progress made in the prevention and control of non-communicable diseases and their risk factors and determinants;

(ii) By 2015, consider developing or strengthening national multisectoral policies and plans to achieve the national targets by 2025, taking into account the Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013–2020;

(iii) Continue to develop, strengthen and implement, as appropriate, multisectoral public policies and action plans to promote health education and health literacy, with a particular focus on populations with low health awareness and/or literacy;

(iv) Raise awareness about the national public health burden caused by non-communicable diseases and the relationship between non-communicable diseases, poverty and social and economic development;

(v) Integrate measures to address non-communicable diseases into health planning and national development plans and policies, including the design

process and implementation of the United Nations Development Assistance Framework;

(vi) Consider establishing, as appropriate to the respective national context, a national multisectoral mechanism, such as a high-level commission, agency or task force for engagement, policy coherence and mutual accountability of different spheres of policymaking that have a bearing on non-communicable diseases, in order to implement health-in-all-policies and whole-of-government and whole-of-society approaches, and to monitor and act on the determinants of non-communicable diseases, including social and environmental determinants;

(vii) Enhance the capacity, mechanisms and mandates, as appropriate, of relevant authorities in facilitating and ensuring action across governmental sectors;

(viii) Strengthen the capacity of ministries of health to exercise a strategic leadership and coordination role in policy development that engages all stakeholders across government, non-governmental organizations, civil society and the private sector, ensuring that issues relating to non-communicable diseases receive an appropriate, coordinated, comprehensive and integrated response;

(ix) Align international cooperation on non-communicable diseases with national plans concerning non-communicable diseases in order to strengthen aid effectiveness and the development impact of external resources in support of non-communicable diseases;

(x) Develop and implement national policies and plans, as relevant, with financial and human resources allocated particularly to addressing non-communicable diseases, in which social determinants are included;

(*b*) By 2016, as appropriate, reduce risk factors for non-communicable diseases and underlying social determinants through the implementation of interventions and policy options to create health-promoting environments, building on guidance set out in appendix 3 to the Global Action Plan;

(*c*) By 2016, as appropriate, strengthen and orient health systems to address the prevention and control of non-communicable diseases and the underlying social determinants through people-centred primary health care and universal health coverage throughout the life cycle, building on guidance set out in appendix 3 to the Global Action Plan;

(*d*) Consider the possible linkages between non-communicable diseases and some communicable diseases, such as HIV/AIDS, call for the integration, as appropriate, of responses to HIV/AIDS and non-communicable diseases, and in this regard call for attention to be given to people living with HIV/AIDS, especially in countries with a high prevalence of HIV/AIDS, in accordance with national priorities;

(*e*) Continue to promote the inclusion of prevention and control of non-communicable diseases within programmes for sexual and reproductive health and maternal and child health, especially at the primary health-care level, as well as communicable disease programmes, such as those addressing tuberculosis, as appropriate;

(*f*) Consider the synergies between major non-communicable diseases and other conditions as described in appendix 1 to the Global Action Plan in order to

develop a comprehensive response for the prevention and control of non-communicable diseases that also recognizes the conditions in which people live and work;

(*g*) Monitor the trends and determinants of non-communicable diseases and evaluate progress in their prevention and control:

(i) Assess progress towards attaining the voluntary global targets and report on the results using the indicators established in the comprehensive global monitoring framework, according to the agreed timelines, and use results from monitoring of the 25 indicators and 9 voluntary targets and other sources of data to inform and guide policy and programming, aiming to maximize the impact of interventions and investments on non-communicable disease outcomes;

(ii) Contribute information on trends in non-communicable diseases to the World Health Organization, according to the agreed timelines on progress made in the implementation of national action plans and on the effectiveness of national policies and strategies, coordinating country reporting with global analyses;

(iii) Develop or strengthen, as appropriate, surveillance systems to track social disparities in non-communicable diseases and their risk factors as a first step to addressing inequalities, and pursue and promote gender-based approaches for the prevention and control of non-communicable diseases on the basis of data disaggregated by sex, age and disability, in an effort to address the critical differences in the risks of morbidity and mortality from non-communicable diseases for women and men;

(*h*) Continue to strengthen international cooperation in support of national, regional and global plans for the prevention and control of non-communicable diseases, inter alia, through the exchange of best practices in the areas of health promotion, legislation, regulation, strengthening of health systems, training of health-care personnel and the development of appropriate health-care infrastructure and diagnostics and by promoting the development and dissemination of appropriate, affordable and sustainable transfer of technology on mutually agreed terms for the production of affordable, safe, effective and quality medicines and vaccines, while recognizing the leading role of the World Health Organization as the primary specialized agency for health in that regard;

31. Continue to strengthen international cooperation through North-South, South-South and triangular cooperation in the prevention and control of non-communicable diseases to promote at the national, regional and international levels an enabling environment to facilitate healthy lifestyles and choices, bearing in mind that South-South cooperation is not a substitute for, but rather a complement to, North-South cooperation;

32. Continue to explore the provision of adequate, predictable and sustained resources, through domestic, bilateral, regional and multilateral channels, including traditional and voluntary innovative financing mechanisms;

Moving forward: international commitments

33. Invite the Development Assistance Committee of the Organization for Economic Cooperation and Development to consider developing a purpose code for non-communicable diseases in order to improve the tracking of official development

assistance in support of national efforts for the prevention and control of non-communicable diseases;

34. Reiterate our commitment to actively promote national and international investments and strengthen national capacity for quality research and development, in all aspects relating to the prevention and control of non-communicable diseases, in a sustainable and cost-effective manner, while noting the importance of continuing to incentivize innovation in public health, inter alia, as appropriate, through a sound and balanced intellectual property rights system, which is important, inter alia, for the development of new medicines, as recognized in the Doha Declaration on the World Trade Organization Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement) and Public Health;

35. Reaffirm the right to use, to the fullest extent, the provisions contained in the World Trade Organization Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement), the Doha Declaration on the TRIPS Agreement and Public Health, the decision of the General Council of the World Trade Organization of 30 August 2003 on the implementation of paragraph 6 of the Doha Declaration, and, when formal acceptance procedures are completed, the amendment to article 31 of the TRIPS Agreement, which provide flexibilities for the protection of public health, and in particular to promote access to medicines for all and encourage the provision of assistance to developing countries in this regard;

36. Give due consideration to addressing non-communicable diseases in the elaboration of the post-2015 development agenda, taking into account, in particular, their serious socioeconomic consequences and determinants and their links to poverty;

37. Call upon the World Health Organization, in consultation with Member States, in the context of the comprehensive global coordination mechanism for the prevention and control of non-communicable diseases, while ensuring appropriate protection from vested interests, to develop, before the end of 2015, an approach that can be used to register and publish contributions of the private sector, philanthropic entities and civil society to the achievement of the nine voluntary targets for non-communicable diseases;

Towards the world we want: follow-up

38. Request the Secretary-General, in collaboration with Member States, the World Health Organization and relevant funds, programmes and specialized agencies of the United Nations system, to submit to the General Assembly, by the end of 2017, for consideration by Member States, a report on the progress achieved in the implementation of the present outcome document and of the political declaration of the high-level meeting of the Assembly on the prevention and control of non-communicable diseases, in preparation for a comprehensive review, in 2018, of the progress achieved in the prevention and control of non-communicable diseases.

100th plenary meeting
10 July 2014